LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Y sursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

To Be Filed By:

L-3 LOE

LOBBYISTS (Sec. 67-6619)

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2005 FEB 17 AM 8: 57

STATE OF IDAHO

(Type or print clearly in black ink)						STATE OF TOTAL			
See instructions at bottom of page Lobbyist's name and permanent business address Sob C. Hall				z./15/05		Period covered			
PMB 203 SIZO W. OVER BOISE, ID &			2/13/0	>	(Mo.)	(Day)	(Yr.)		
Item Totals of all reportab	ole expenditures made or	incurred b	y Lobbyist	or by Lobbyist's Er	mployer on b	ehalf of Lobbyis	t's Emplo	yer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	* Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)							
Do Not Have to be Reported	All Employers	Emplo	yer No. 1	Employer No.	2 Emplo	oyer No. 3	Employe	er No. 4	
Entertainment Food and Refreshment	s 45 00	\$		\$	\$	s			
Living Accommodations									
Advertising									
Travel	15 00								
Telephone	20 00								
Other Expenses or Services	10 00				_				
Total	\$ 9000	\$		\$	\$	\$			
*When the number of employers							ered on Pag	ge 1.	
The totals of each expenditure of more than fifty do Date Place						es of Legislators & Public Officials in Group			
Continued on attached page(s)									
INSTRUCTIONS				tem 3		oloyer(s) Name(s) and Address(es)			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.			on No.	Idaho Newspaper Assn. (same as lobbyist, above)					
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.				2					
TO BE FILED WITH: Ben Y sursa Secretary of State			No.	3					
PO Box 83720 Boise, ID 83720-0080			No.	4					